August 14, 2006

Tsuyoshi KASAURA

Filing Date

Application Number

First Named Inventor

Request

for

Continued Examination (RCE)

| Transmittal | First Named Inventor | Tsuyoshi KASAURA |
|--|------------------------|-------------------|
| Address to: | Art Unit | 2139 |
| Mail Stop RCE Commissioner for Patents | Examiner Name | A. F. Tabor |
| P.O. Box 1450 Alexandria, VA 22313-1450 | Attorney Docket Number | 1190-0634PUS1 |
| This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Conflined Examination (RCE) practice under 37 CFR 1.114 does not apply to a part application filed prior to June 8. 1995, or to amy design application. See tetraction Sheet for RCEs front to be obtained to the USPT(O) on page 2. | | |
| Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously field unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s). | | |
| a. x Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. | | |
| i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on | | |
| ii. Uother | | |
| b. Enclosed | | |
| iAmendment/Reply iiiInformation Disclosure Statement (IDS) | | |
| iiAffidavit(s)/Declaration(s) ivOther | | |
| 2. Miscellaneous | | |
| a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a | | |
| period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) | | |
| b Other | | |
| 3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. | | |
| a. X The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any | | |
| Overpayments, to Deposit Account No. 02-2448 | | |
| i. X RCE fee required under 37 CFR 1.17(e) | | |
| ii. X Extension of time fee (37 CFR 1.136 and 1.17) | | |
| iii. Other | | |
| b. Check in the amount of \$ enclosed | | |
| WARNING: Information on this form mp; become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED | | |
| Signature We Killed | He 46 Date | November 14, 2008 |
| Name (Print/Type) Michael K. Mutter William | MTCTCOMBRegistrat | ion No. 29.680 |